

# RENEWAL OF MEMBERSHIP



FULL NAME:  
(Prof./Dr./Mr./Mrs./Miss/Ms.) .....

RESIDENTIAL ADDRESS: .....  
..... Code: .....

POSTAL ADDRESS: .....  
..... Code: .....

CONTACT NUMBERS: (Home): ..... (Business): .....  
(Cell): ..... (E-mail) .....

**I, the undersigned, agree to abide by the rules of the Club**

SIGNATURE: ..... DATE: .....

MEMBERSHIP FEES:

- # FULL MEMBERSHIP .....R60, 00 per annum.
- # FAMILY MEMBERSHIP .....R80, 00 per annum (includes children under 16).
- # If joining after 30<sup>th</sup> June of any year, half-year's fees will be accepted if the following year's fees are paid in full at the same time.

Payment for Membership (Cheque or Direct Internet Deposit) is attached hereto: R.....

**NB!!! (PLEASE NO DIRECT CASH DEPOSITS DUE TO HEAVY BANK CHARGES)**

Payments can be made directly into Western Province Cat Club's Bank Account provided proof of payment accompanies the completed application form.

Bank details are: FNB Plumstead, Branch No: 20-11-09, A/C No: 62000775174

Please return completed form to:

THE HONORARY TREASURER  
WESTERN PROVINCE CAT CLUB  
4 GREEN ROAD  
BERGVLiet 7945  
imoore1946@gmail.com

**PLEASE COMPLETE BELOW:**

NEWSLETTERS TO BE SENT PER E-MAIL :	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
SHOW PAPERS REQUIRED :	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
SHOW PAPERS ACCEPTABLE PER E-MAIL :	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>